

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		<i>10/19/01</i>
O.I.P.E. CLASSIFIER			<i>6-29-01</i>
FORMALITY REVIEW	<i>SM</i>	<i>3CAB4</i>	<i>8/8/01</i>
RESPONSE FORMALITY REVIEW	<i>KL</i>	<i>1019</i>	<i>11-30-01</i>

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

38-00
 38-5583
 130/01